



INDIVIDUAL HEALTH INSURANCE DATA REPORT

NORTH DAKOTA INSURANCE DEPARTMENT

SFN 54182 (10-2004)

North Dakota Century Code 26.1-36.4-06(3) requires the reporting of data in the individual hospital/surgical/medical expense and major medical market to determine the impact of the 1995 reforms on this market. Please complete the information below based on North Dakota statistics for the **last calendar year**.

Name of Respondent	Respondent Telephone Number
Title of Respondent	
Carrier Name	

Total number of different types of policies (i.e. different form numbers) being marketed to individuals	
Total EARNED PREMIUM for individuals policies	
Total INCURRED CLAIMS for individual policies	
Number of individual policies	
Number of Covered Lives (insureds plus dependents) for individual policies	

Average Premium Increase in your Individual Block of Business	Ratio of Lowest to Highest Rates
How do you handle high-risk applicants? (Check all that apply)	
Deny Coverage Apply Exclusionary Rider Rate Up (Indicate Range) _____ Other (Specify): _____	
Percentage of New Policyholders that Receive Credit for Qualifying Previous Coverage (estimate if necessary)	

In addition to the required North Dakota Basic and Standard Policies, what other plans, if any, are available to new applicants?

Provide an 800-number for customers or potential applicants to contact for more information on your plans

Please return by **March 15** to:

North Dakota Insurance Department
600 East Boulevard
Bismarck, ND 58505
FAX: 701-328-4880